



REDACTED – FOR PUBLIC INSPECTION

June 27, 2017

*Via Electronic Filing*

Marlene H. Dortch, Secretary  
Federal Communications Commission  
Office of the Secretary, Room TW-A325  
445 12<sup>th</sup> Street, SW  
Washington, DC 20554

Re: WC Docket No. 10-90, WC Docket No. 11-42, **WC Docket No. 14-58**  
2017 ETC Annual Report Pursuant to 47 C.F.R. § 54.313 and 54.422  
Study Area Code 310679, Bloomingtondale Telephone Company

Dear Executive Secretary:

Bloomingtondale Telephone Company ("Bloomingtondale") has attached for filing confidential and redacted versions of the FCC Form 481 ETC annual reporting information pursuant to sections 54.313 and 54.422 of the Commission's rules<sup>1</sup>. Bloomingtondale seeks confidential treatment under Protective Order for the information filed pursuant to section 54.313(f)(2) of the Commission's regulations<sup>2</sup>. The redacted version is also being filed this date via the FCC's Electronic Comment Filing System.

Sincerely,

Steven W. Shults, CPA  
Accounting Manager/Assistant Treasurer

cc: Mr. Charles Tyler, Telecommunications Access Policy Division

<sup>1</sup> 47 C.F.R. 54.313 and 47 C.F.R. 54.422.

<sup>2</sup> *Connect America Fund et al.*, WC Docket No. 10-90 *et al.*, Protective Order, DA 12-1857 rel. Nov. 16, 2012 (Protective Order). 47 C.F.R. 54.313(f)(2).

**FCC Form 481 - Carrier Annual Reporting  
Data Collection Form**FCC Form 481  
OMB Control No. 3060-0986/OMB Control No. 3060-0819  
July 2013

<010>	Study Area Code	310679
<015>	Study Area Name	BLOOMINGDALE TEL CO
<020>	Program Year	2018
<030>	Contact Name: Person USAC should contact with questions about this data	Steve Shults
<035>	Contact Telephone Number: Number of the person identified in data line <030>	2695217313 ext.
<039>	Contact Email Address: Email of the person identified in data line <030>	swshults@bloomingtondalecom.net
Form Type		54.313 and 54.422

<010>	Study Area Code	310679
<015>	Study Area Name	BLOOMINGDALE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Steve Shults
<035>	Contact Telephone Number - Number of person identified in data line <030>	2695217313 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	swshulcs@bloomingdalecom.net

No

[illegible]

<b>(300) Unfulfilled Service Request Data Collection Form</b>		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013	
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<010>	Study Area Code	310679
<015>	Study Area Name	BLOOMINGDALE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Steve Shults
<035>	Contact Telephone Number - Number of person identified in data line <030>	2693217313 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	sshults@bloomingtondacom.net

<300> Unfulfilled service request (voice)

0

<310> Detail on attempts (voice)

<320> Unfulfilled service request (broadband)

0

<330> Detail on attempts (broadband)

(400) Number of Complaints per 1,000 customers  
Data Collection Form

DOC Form 481  
OMB Control No. 3060-0585/OMB Control No. 3060-0819  
July 2013

<010>	Study Area Code	310479
<015>	Study Area Name	BLISSINGDALE TWP CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Steve Shalts
<035>	Contact Telephone Number - Number of person identified in data line <030>	269-217313 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	sshalts@blissingdaleco.org
<400>	Select from the drop-down list to indicate how you would like to report voice complaints (zero or greater) for voice telephony service in the prior calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize.	Offered only fixed voice
<410>	Complaints per 1000 customers for fixed voice	0.0
<420>	Complaints per 1000 customers for mobile voice	
<430>	Select from the drop-down list to indicate how you would like to report end-user customer complaints (zero or greater) for broadband service in the prior calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize.	Offered only fixed broadband
<440>	Complaints per 1000 customers for fixed broadband	0.0
<450>	Complaints per 1000 customers for mobile broadband	

**(500) Compliance With Service Quality Standards and Consumer Protection Rules  
Data Collection Form**

PCC Form 481  
OMB Control No. 3060-0555/OMB Control No. 3060-0819  
July 2013

<010> Study Area Code	310679
<015> Study Area Name	ACCOUNTING TABLE 191.00
<020> Program Year	2019
<030> Contact Name - Person USAC should contact regarding this data	Steno Spitz
<035> Contact Telephone Number - Number of person identified in data line <030>	2495217713 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	ensteno@bluewin.ch
<500> Certify compliance with applicable service quality standards and consumer protection rules	Yes
<510> Descriptive document for Service Quality Standards & Consumer Protection Rules Compliance	310679m1510.pdf
<515> Certify compliance with applicable minimum service standards	

**(600) Functionality in Emergency Situations  
Data Collection Form**

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	313610
<015>	Study Area Name	PICKENS/BLACK HILLS CO
<020>	Program Year	2019
<030>	Contact Name - Person USAC should contact regarding this data	Steve Shultz
<035>	Contact Telephone Number - Number of person identified in data line <030>	2695217313 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	sshultz@blacksingdalecon.net
<600>	Certify compliance regarding ability to function in emergency situations	Yes
<610>	Descriptive document for Functionality in Emergency Situations	310679m1610.pdf

FCC Form 481  
OMB Control No. 3060-0986/OMB Control No. 3060-0819  
July 2013

[illegible]







**(900) Tribal Lands Reporting  
Data Collection Form**

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	310679
<015>	Study Area Name	BLOOMINGDALE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Steve Shults
<035>	Contact Telephone Number - Number of person identified in data line <030>	2695217313 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	swshults@bloomingtondalecom.net

&lt;900&gt; Does the filing entity offer tribal land services? (Y/N)

No

&lt;910&gt; Tribal Land(s) on which ETC Serves

&lt;920&gt; Tribal Government Engagement Obligation

Name of Attached Document

If your company serves Tribal lands, please select (Yes, No, NA) for each these boxes to confirm the status described on the attached PDF, on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:

- <921> Needs assessment and deployment planning with a focus on Tribal community anchor institutions.
- <922> Feasibility and sustainability planning;
- <923> Marketing services in a culturally sensitive manner;
- <924> Compliance with Rights of way processes
- <925> Compliance with Land Use permitting requirements
- <926> Compliance with Facilities Siting rules
- <927> Compliance with Environmental Review processes
- <928> Compliance with Cultural Preservation review processes
- <929> Compliance with Tribal Business and Licensing requirements.

Select Yes or No or Not Applicable

**(1000) Voice and Broadband Service Rate Comparability  
Data Collection Form**

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

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<015>	Study Area Name	BLOOMINGDALE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Steve Shults
<035>	Contact Telephone Number - Number of person identified in data line <030>	2695217313 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	swshults@bloomingdalecom.net

<1000> Voice services rate comparability certification Yes

<1010> Attach detailed description for voice services rate comparability compliance 310679mil010.pdf

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Name of Attached Document

<1020> Broadband comparability certification Yes - Pricing is no more than the most recent applicable benchmark announced by the Wireline Competition Bureau

<1030> Attach detailed description for broadband comparability compliance 310679mil030.pdf

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Name of Attached Document

**(1100) No Terrestrial Backhaul Reporting  
Data Collection Form**

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	310679
<015>	Study Area Name	BLOOMINGDALE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Steve Shults
<035>	Contact Telephone Number - Number of person identified in data line <030>	2695217313 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	swshults@bloomingdalecom.net

&lt;1100&gt; Certify whether terrestrial backhaul options exist (Y/N)

<1130> Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(g).

**(1200) Terms and Condition for Lifeline Customers**  
**Lifeline**  
**Data Collection Form**

FCC Form 481  
 OMB Control No. 3060-0986/OMB Control No. 3060-0819  
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<030>	Contact Name - Person USAC should contact regarding this data	Steve Shults
<035>	Contact Telephone Number - Number of person identified in data line <030>	2695217313 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	swshults@bloomingdalecom.net

<1210> Terms & Conditions of Voice Telephony Lifeline Plans

310679ml1210.pdf

Name of Attached Document

<1220> Link to Public Website

HTTP [http://bloomingdalecom.net/\\_pdf/lifeline\\_application.pdf](http://bloomingdalecom.net/_pdf/lifeline_application.pdf)

"Please check these boxes below to confirm that the attached document(s), on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:

- |        |   |                                     |
|--------|---|-------------------------------------|
| <1221> | Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers, | <input checked="" type="checkbox"/> |
| <1222> | Details on the number of minutes provided as part of the plan,  | <input checked="" type="checkbox"/> |
| <1223> | Additional charges for toll calls, and rates for each such plan.  | <input checked="" type="checkbox"/> |

**(2005) Price Cap Carrier Additional Documentation****Data Collection Form***Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers*

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	310679
<015>	Study Area Name	BLOOMINGDALE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Steve Shults
<035>	Contact Telephone Number - Number of person identified in data line <030>	2695217313 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	swshults@bloomingdalecom.net

Select the appropriate responses below (Yes, No, Not Applicable) to note compliance as a recipient of Incremental High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e). The information reported on this form and in the documents attached below is accurate.

**Incremental Connect America Phase I reporting**

<2011>	3rd Year Certification 47 CFR §54.313(b)(1)(iii) - Note that for the July 2017 certification, this applies to Round 2 recipients of Incremental Support.	<input type="text"/>	
<2022>	Recipient certifies, representing year three after filing a notice of acceptance of funding pursuant to 54.312(c), that the locations in question are not receiving support under the Broadband Initiatives Program or the Broadband Technology Opportunities Program for projects that will provide broadband with speeds of at least 4 Mbps/1Mbps - 54.313(b)(2)(i). Round 2 recipients only.	<input type="text"/>	
<2023>	The attachment on line 2024 includes a statement of the total amount of capital funding expended in the previous year in meeting Connect America Phase I deployment obligations, accompanied by a list of census blocks indicating where funding was spent. This covers year three - 54.313(b)(2)(ii). Round 2 recipients only.	<input type="text"/>	
<2024A>	Round 2 Recipient of Incremental Support?	<input type="text"/>	<input type="text"/>
<2024B>	Attach list of census blocks indicating where funding was spent in year three - 54.313(b)(2)(ii). Round 2 recipients only.		
<2025A>	Round 2 Recipient of Incremental Support?	<input type="text"/>	<input type="text"/>
<2025B>	Attach geocoded Information for Phase I milestone reports (Round 2 for year three) - Connect America Fund , WC Docket 10-90, Report and Order, FCC 13-73, paragraph 35 (May 22, 2013).		
<2015>	2016 and future Frozen Support Certification 47 CFR § 54.313(c)(4)	<input type="text"/>	

Name of Attached Document Listing Required Information

Name of Attached Document Listing Required Information

**(2005) Price Cap Carrier Additional Documentation****Data Collection Form***Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers*

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

**Price Cap Carrier Connect America ICC Support {47 CFR § 54.313(d)}**

&lt;2016&gt; Certification support used to build broadband

**Connect America Phase II Reporting {47 CFR § 54.313(e)}**

&lt;2017A&gt; Connect America Fund Phase II recipient?

&lt;2017C&gt; Total amount of Phase II support, if any, the price cap carrier used for capital expenditures in 2016.

&lt;2018&gt; Attach the number, names, and addresses of community anchor institutions to which the carrier newly began providing access to broadband service in the preceding calendar year - 54.313(e)(1)(ii)(A)

Name of Attached Document Listing  
Required Information

&lt;2019&gt; Recipient certifies that it bid on category one telecommunications and Internet access services in response to all FCC Form 470 postings seeking broadband service that meets the connectivity targets for the schools and libraries universal service support program for eligible schools and libraries located within any area in a census block where the carrier is receiving Phase II model-based support, and that such bids were at rates reasonably comparable to rates charged to eligible schools and libraries in urban areas for comparable offerings - 54.313(e)(1)(ii)(C)



<010>	Study Area Code	310679
<015>	Study Area Name	BLOOMINGDALE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Steve Shults
<035>	Contact Telephone Number - Number of person identified in data line <030>	2695217313 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	swshults@bloomingtondalecom.net

Select from the drop down menu or check the boxes below to note compliance with 54.313(f)(1). Privately held carriers must ensure compliance with the financial reporting requirements set forth in 47 CFR 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

(3009)	Progress Report on 5 Year Plan Carrier certifies to 54.313(f)(1)(iii)		
Yes - Attach Certification			
(3010A)	Certification of Public Interest Obligations {47 CFR § 54.313(f)(1)(i)}		310679m3010a.pdf
(3010B)	Please Provide Attachment	Name of Attached Document Listing Required Information	
(3012A)	Community Anchor Institutions {47 CFR § 54.313(f)(1)(ii)}	No - No New Community Anchors	
(3012B)	Please Provide Attachment	Name of Attached Document Listing Required Information	
(3013)	Is your company a Privately Held ROR Carrier {47 CFR § 54.313(f)(2)}	(Yes/No)	<input checked="" type="radio"/> <input type="radio"/>
(3014)	If yes, does your company file the RUS annual report	(Yes/No)	<input checked="" type="radio"/> <input type="radio"/>
Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:			
(3015)	Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)		<input checked="" type="checkbox"/>
(3016)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows		<input checked="" type="checkbox"/>
(3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation	Name of Attached Document Listing Required Information	310679m3017.pdf
(3018)	If the response is no on line 3014, is your company audited?	(Yes/No)	<input type="radio"/> <input type="radio"/>
If the response is yes on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains:			
(3019)	Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers		<input type="checkbox"/>
(3020)	Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows		<input type="checkbox"/>
(3021)	Management letter and/or audit opinion issued by the independent certified public accountant that performed the company's financial audit.		<input type="checkbox"/>
If the response is no on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains:			
(3022)	Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers		<input type="checkbox"/>
(3023)	Underlying information subjected to a review by an independent certified public accountant		<input type="checkbox"/>
(3024)	Underlying information subjected to an officer certification.		<input type="checkbox"/>
(3025)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows		<input type="checkbox"/>
(3026)	Attach the worksheet listing required information	Name of Attached Document Listing Required Information	

(3005) Rate Of Return Carrier Additional Documentation (Continued)

Data Collection Form

FCC Form 431  
OMB Control No. 3060-0936/OMB Control No. 3060-0819  
July 2013

<01>	Study Area Code	310679
<01>	Study Area Name	BLOCKINGDALE TEL CO
<02>	Program Year	2018
<03>	Contact Name - Person USAC should contact regarding this data	Steve Shults
<03>	Contact Telephone Number - Number of person identified in data line <030>	2695217313 ext.
<03>	Contact Email Address - Email Address of person identified in data line <030>	awshults@blockingdalecom.net

Financial Data Summary

(3027) Revenue	
(3028) Operating Expenses	
(3029) Net Income	
(3030) Telephone Plant In Service(TPIS)	
(3031) Total Assets	
(3032) Total Debt	
(3033) Total Equity	
(3034) Dividends	

Name of Attached Document Listing Required Information

<010>	Study Area Code	310679
<015>	Study Area Name	BLOOMINGDALE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Steve Shulte
<035>	Contact Telephone Number - Number of person identified in data line <030>	282227313 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	sshulte@bloomingtontel.com.net

**4005 Rural Broadband Experiment**

Authorized Rural Broadband Experiment (RBE) recipients must address the certification for public interest obligations, provide a list of newly served community anchor institutions, and provide a list of locations where broadband has been deployed.

**Public Interest Obligations – FCC 14-98 (paragraphs 26-29, 78)**

Please address Line 4001 regarding compliance with the Commission's public interest obligations. All RBE participants must provide a response to Line 4001.

**4001.** Recipient certifies that it is offering broadband to the identified locations meeting the requisite public interest obligations consistent with the category for which they were selected, including broadband speed, latency, usage capacity, and rates that are reasonably comparable to rates for comparable offerings in urban areas?

**Community Anchor Institutions – FCC 14-98 (paragraph 79)**

**4003a.** RBE participants must provide the number, names, and addresses of community anchor institutions to which they newly deployed broadband service in the preceding calendar year. On this line, please respond (yes – attach new community anchors, no – no new anchors) to indicate whether this list will be provided.

If yes to 4003A, please provide a response for 4003B.

**4003b.** Provide the number, names and addresses of community anchor institutions to which the recipient newly began providing access to broadband service in the preceding calendar year.

Name of Attached Document Listing Required Information \_\_\_\_\_

**Broadband Deployment Locations – FCC 14-98 (paragraph 80)**

**4004a.** Attach a list of geocoded locations to which broadband has been deployed as of the June 1st immediately preceding the July 1st filing deadline for the FCC Form 481.

Name of Attached Document Listing Required Information \_\_\_\_\_

**4004b.** Attach evidence demonstrating that the recipient is meeting the relevant public service obligations for the identified locations. Materials must at least detail the pricing, offered broadband speed and data usage allowances available in the relevant geographic area.

Name of Attached Document Listing Required Information \_\_\_\_\_

<b>Certification - Reporting Carrier Data Collection Form</b>	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010> Study Area Code	310679
<015> Study Area Name	BLOOMINGDALE TEL CO
<020> Program Year	2018
<030> Contact Name - Person USAC should contact regarding this data	Steve Shults
<035> Contact Telephone Number - Number of person identified in data line <030>	2695217313 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	swshults@bloomingdalecom.net

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

<b>Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients</b>	
I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.	
Name of Reporting Carrier:	BLOOMINGDALE TEL CO
Signature of Authorized Officer:	 Date 6/27/17
Printed name of Authorized Officer:	Steven Shults
Title or position of Authorized Officer:	Accounting Manager/Asst Treasurer
Telephone number of Authorized Officer:	2695217313 ext.
Study Area Code of Reporting Carrier:	310679 Filing Due Date for this form: 07/03/2017
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

<b>Certification - Agent / Carrier</b> <b>Data Collection Form</b>	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010> Study Area Code	310679
<015> Study Area Name	BLOOMINGDALE TEL CO
<020> Program Year	2018
<030> Contact Name - Person USAC should contact regarding this data	Steve Shults
<035> Contact Telephone Number - Number of person identified in data line <030>	2695217313 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	swshults@bloomingdalecom.net

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I certify that (Name of Agent) _____ is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.	
Name of Authorized Agent: _____	
Name of Reporting Carrier: _____	
Signature of Authorized Officer: _____	Date: _____
Printed name of Authorized Officer: _____	
Title or position of Authorized Officer: _____	
Telephone number of Authorized Officer: _____	
Study Area Code of Reporting Carrier: _____	Filing Due Date for this form: _____
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.	
Name of Reporting Carrier: _____	
Name of Authorized Agent Firm: _____	
Signature of Authorized Agent or Employee of Agent: _____	Date: _____
Name of Authorized Agent Employee: _____	
Title or position of Authorized Agent or Employee of Agent: _____	
Telephone number of Authorized Agent or Employee of Agent: _____	
Study Area Code of Reporting Carrier: _____	Filing Due Date for this form: _____
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

## **Attachments**



***Certification that Bloomingtondale Telephone Company, Inc. (Carrier) complying with applicable service quality standards and consumer protection rules***

As a licensed local exchange carrier in Michigan, Carrier is obligated to comply with the numerous consumer protections contained in the Michigan Telecommunications Act (MTA), and all MPSC Guidelines and Rules promulgated or adopted there under. Carrier will comply with all applicable and effective MPSC and FCC consumer protection and service quality standards. Which will include MPSC Customer Migration Rules, Operation Service Provider Rules, Anti-Slamming Rules. Carrier has a Customer Proprietary Network Information (CPNI) Manual which reflects the FCC's current CPNI rules (a copy of the Manual has been submitted to the MPSC previously).

Carrier has also implemented an Identity Theft Prevention Program in accordance with the Federal Red Flags Rule.

A handwritten signature in cursive script, appearing to read 'Steven Shults CPA', written over a horizontal line.

Steven Shults, CPA  
Accounting Manager

A handwritten date '6/19/17' written over a horizontal line.

Date



**BLOOMINGDALE**  
**TELEPHONE COMPANY**

*Certification that Bloomingtondale Telephone Company Inc., is able to function in emergency situations*

Bloomingtondale Telephone Company Inc., (Carrier) is able to remain functional in an emergency situation through the use of backup power to ensure functionality without an external power source. Carrier has backup battery reserve in its central office, which enables it to provide service for a minimum of 8 hours. Carrier has backup battery reserve in its remote DSLAMs and cabinets, which enables it to provide service for a minimum of 8 hours. Carrier service is consistent with the prior obligations to provide service in emergency situations as set forth in §54.202(a)(2) and Rule 46 of the MPSC's Service Quality Rules (2000 AC, R 484.546), and its network is engineered to provide maximum capacity in order to handle excess traffic in the event of traffic spikes resulting from emergency situations. Carrier has redundancy in its network for use in re-rerouting traffic when facilities are damaged.

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Steven Shults, CPA  
Accounting Manager

6/19/17

Date



FCC Form 481  
OMB Control No. 3060-0986/OMB Control No. 3060-0819  
July 2013

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<035>	Contact Telephone Number - Number of person identified in data line <030>	2695217313 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	sshults@bloomingtondalecom.net

1/1/2017	
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[illegible]

(710) Broadband Price Offerings  
Data Collection Form

FCC Form 481  
OMB Control No. 3060-0986/OMB Control No. 3060-0819  
July 2013

<010>	Study Area Code	310679
<015>	Study Area Name	BLOOMINGDALE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Steve Shults
<035>	Contact Telephone Number - Number of person identified in data line <030>	2695217313 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	swshults@bloomingle.com.net

[illegible]

### Data Collection Form

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July 2013

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<015>	Study Area Name	BLOOMINGDALE TEL CO
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<039>	Contact Email Address - Email Address of person identified in data line <030>	swshults@bloomingle.com.net

<810>	Reporting Carrier	Bloomington Tel Co
<811>	Holding Company	Bloomington Telephone Company, Inc.
<812>	Operating Company	Bloomington Telephone Company, Inc.

[illegible]



**BLOOMINGDALE**  
**TELEPHONE COMPANY**

*Certification that Bloomingtondale Telephone Company Inc., is able to provide voice services at a rate comparable to the Wireline Competition Bureau subscribed rate*

Bloomingtondale Telephone Company Inc., (Carrier) provides fixed voice services that is priced less than two standard deviations above the applicable national average urban rate for voice service.

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Steven Shults, CPA  
Accounting Manager

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6/19/17

Date



**BLOOMINGDALE**  
**TELEPHONE COMPANY**

*Certification that Bloomingtondale Telephone Company Inc., is able to provide broadband services at a rate less than the Wireline Competition Bureau benchmark rate*

Bloomingtondale Telephone Company Inc., (Carrier) provides fixed broadband services that are priced less than the 2016 benchmark rate of \$77.98 for Download Speed of 10 Mbps and Upload Speed of 1 Mbps with Unlimited Usage Allowance.

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*Steven Shults CPA*

Steven Shults, CPA  
Accounting Manager

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*6/19/17*

Date

**Michigan Lifeline Administration Service**  
**IMPORTANT INFORMATION**  
Please Review Before Submitting Application

For questions, please call 1-866-321-2323.

**PROGRAM QUALIFICATION AND APPLICABLE DISCOUNTS**

The Federal Communications Commission (FCC) made changes to Lifeline regulations that went into effect on December 2, 2016. As a result, customers may qualify for full or reduced benefits. The table below applies to customer who enroll in the Lifeline program after December 2, 2016 and to currently enrolled customers on their service initiation date when the FCC's "rolling recertification" process begins on July 1, 2017.

Program Participation	Federal/State Discount	MPSC Discount	Total Discount
Federal Public Housing Assistance	\$9.25	\$2.00 <sup>B</sup>	\$11.25 <sup>A</sup>
Medicaid	\$9.25	\$2.00 <sup>B</sup>	\$11.25 <sup>A</sup>
Supplemental Nutrition Assistance Program	\$9.25	\$2.00 <sup>B</sup>	\$11.25 <sup>A</sup>
Supplemental Security Income	\$9.25	\$2.00 <sup>B</sup>	\$11.25 <sup>A</sup>
Low-Income Home Energy Assistance Program	\$9.25 <sup>B</sup>	\$2.00 <sup>B</sup>	\$11.25 <sup>A</sup>
National School Lunch Program	\$9.25 <sup>B</sup>	\$2.00 <sup>B</sup>	\$11.25 <sup>A</sup>
Temporary Assistance for Needy Families	\$9.25 <sup>B</sup>	\$2.00 <sup>B</sup>	\$11.25 <sup>A</sup>
Veteran's Pension Program	\$9.25	\$0	\$9.25
Veteran's Survivor's Pension Program	\$9.25	\$0	\$9.25

<sup>A</sup> Qualifying customers age 65 and over receive additional \$1.10 per month discount.

<sup>B</sup> Applies to voice-only service or voice/broadband bundled service; not applicable to broadband-only service.

**INCOME INFORMATION AND GUIDELINES**

Customers that don't participate in any of the programs listed above can still qualify for discounts if their annual household income is at certain thresholds set by the federal and state governments. The tables below provide applicable discount amounts and current guidelines.

Income Level	Federal/State Discount	MPSC Discount	Total Discount
Annual Income At or Below 150% of Poverty Level	\$9.25	\$2.00 <sup>B</sup>	\$11.25 <sup>A</sup>

<sup>A</sup> Qualifying customers age 65 and over receive additional \$1.10 per month discount.

<sup>B</sup> Applies to voice-only service or voice/broadband bundled service; not applicable to broadband-only service.

Number in Household	150% of Federal Poverty Level
1	\$18,090
2	\$24,360
3	\$30,630
4	\$36,900
For each additional household member add	\$6,270

## BROADBAND AND VOICE SERVICES QUALIFY FOR DISCOUNTS

Federal Lifeline Benefits are now available for qualifying broadband as well as voice services.

**Broadband Service:** Federal discounts are only available on certain services. State discounts do not apply.

- Broadband speeds must be 10 Mbps download and 1 Mbps upload or faster to qualify.
- Lifeline discounts on broadband include a transfer restriction (port freeze) for 12 months. This means that once Lifeline broadband discounts begin on your service you will be unable to obtain a Lifeline discount with another provider for 12 months if you switch your service. If you already have a Lifeline broadband discount with another provider, you cannot get a Lifeline discount from a new provider until 12 months after your current broadband Lifeline discounts began.

**Voice Service and Bundled Voice-Broadband Service:** Federal and state discounts are available to qualified participants.

- Lifeline discounts on voice include a transfer restriction (port freeze) for 60 days. This means you are unable to obtain the Lifeline discount on service with another provider for 60 days from the date that your current voice service Lifeline discounts began.
- If you purchase a bundle of voice and qualifying broadband, the federal discount will be applied to your qualifying bundle, and the 12-month benefit transfer restriction will apply. State discounts will apply to your voice services only.
- If you purchase voice service and a non-qualifying broadband service, you will receive both state and federal Lifeline discounts on your voice service.
- Certain exceptions to the transfer restrictions apply. See [www.usac.org/ls/change-my-company.aspx](http://www.usac.org/ls/change-my-company.aspx) for more information.

**General Condition Applicable to All Services:**

- Total Lifeline discounts cannot exceed the price of service.

### LIFELINE ADMINISTRATION SERVICE PROCESSES APPLICATIONS FOR THE FOLLOWING COMPANIES

AcenTek	Deerfield Farmers' Telephone Co.	Southwest Michigan Communications
Allband Communications Coop.	Hiawatha Telephone Co.	Springport Telephone Co.
Baraga Telephone Co.	Kaleva Telephone Co.	TDS Telecom
Barry County Telephone Co.	Lennon Telephone Co.	Thumb Cellular
Blanchard Telephone Co.	Michigan Central Broadband Co.	Upper Peninsula Telephone Co.
Bloomington Communications	Midway Telephone Co.	Waldron Telephone Co.
Carr Telephone Co.	Ogden Communications	Westphalia Broadband, Inc.
CenturyLink	Ontonagon County Telephone Co.	Westphalia Telephone Co.
Chapin Telephone Co.	Pigeon Telephone Co.	Winn Telecom
Climax Telephone Co.	Sand Creek Telephone Co.	Winn Telephone Co.

**If your phone company is not on the list above, please contact them directly to apply for Lifeline discounts.**



## LEGAL REQUIREMENTS

PLEASE READ THE FOLLOWING IMPORTANT INFORMATION ABOUT THE LIFELINE PROGRAM BEFORE YOU APPLY:

- Lifeline is a non-transferable benefit and the subscriber may not transfer his or her benefit to any other person.
- Lifeline is a federal benefit and willfully making false statements to obtain the benefit can result in fines, imprisonment, de-enrollment or being barred from the program.
- Only one Lifeline service is available per household. A household is defined for the purposes of the Lifeline program as any individual or group of individuals who live together at the same address and share income and expenses.
- A household is not permitted to receive Lifeline assistance from multiple telephone service providers. This includes both wireless and wireline providers.
- Violation of the one-per-household limitation constitutes a violation of the Federal Communications Commission's rules and will result in the subscriber's de-enrollment from the program and potentially prosecution by the US government.
- The applicants understands that if they are currently receiving Lifeline benefits from another carrier, by submitting this application, they agree to discontinue receiving another carrier's benefit and receive their one Lifeline benefit through the submission of this company's application.
- The applicant agrees to notify their telephone company within 30 days if s/he no longer qualifies for Lifeline and may be subjected to penalties upon failure to do so.
- The applicant will notify their telephone company within 30 days of any changes to residential address.
- The applicant is required to recertify their continued eligibility in the Lifeline program annually and understands that failure to do so will result in termination of participation in the program.
- The applicant consents to Lifeline Administration Service providing their Lifeline service account information, including but not limited to, the applicant's name, residential address, phone number, date of birth, last 4 digits of social security number, the date on which Lifeline service was initiated/terminated, amount of Lifeline support provided, and the means of eligibility criteria through which the applicant qualified, to the Universal Service Administrative Company (USAC), USAC's agents and/or the National Lifeline Accountability Database (NLAD) to ensure the proper administration of the Lifeline program. The applicant understands that failure to do so will result in rejection of request for Lifeline services.
- The applicant understands that once s/he signs up for discounts with one provider, s/he cannot receive Lifeline benefits from another provider for a period of time. For voice-only services that qualify for Lifeline discounts, the applicant cannot move benefits to another provider for 60 days. For broadband services that qualify for Lifeline discounts, the applicant cannot move benefits to another provider for 12 months.

REVISED 1/2017



**Michigan Lifeline Administration Service  
LIFELINE APPLICATION  
TOLL FREE 1-866-321-2323**

To apply for Lifeline Service, complete the application below and send it to:  
Lifeline Administration Service, PO Box 11037, Lansing, Michigan 48901 or fax to 517-482-3548

**IDENTIFICATION INFORMATION (PLEASE PRINT)**

Applicant's phone number:		Name of phone company:	
Date of Birth:		Last 4-digits of Social Security Number:	
Last Name:	First Name:	M.I.:	
Street:			
You must provide a residential street address. Per FCC regulations, it cannot be a P.O. Box.			
City:		State:	ZIP:
This is my permanent address: Yes <input type="checkbox"/> No <input type="checkbox"/> This is a rural address with no postal route: Yes <input type="checkbox"/> No <input type="checkbox"/>			
Billing Address, City, State and Zip Code (if different from Service Address)			
There are multiple unique households (e.g. nursing home, assisted living facility) at my address, as defined in this program.			YES <input type="checkbox"/> NO <input type="checkbox"/>
The service I subscribe to is: <input type="checkbox"/> Voice Only <input type="checkbox"/> Broadband Only <input type="checkbox"/> Both Voice and Broadband			

**PROGRAM QUALIFICATION DETERMINATION**

To be eligible for Lifeline discounts, regulations require you to be participating in one of the assistance programs listed below or to have an annual income that meets certain thresholds. Please complete Step 1 and Step 2 below.

**Step 1.** Indicate if you, or the member of your household named below, receives assistance from one of the listed programs. Include documentation of participation in the checked program with your completed application.

Name of person enrolled in program:

<input type="checkbox"/> Federal Public Housing Assistance	<input type="checkbox"/> Veteran's Survivor Pension Benefits
<input type="checkbox"/> Medicaid	<input type="checkbox"/> Low-Income Home Energy Assistance Program
<input type="checkbox"/> Supplemental Nutrition Assistance Program	<input type="checkbox"/> National School Lunch Program
<input type="checkbox"/> Supplemental Security Income	<input type="checkbox"/> Temporary Assistance for Needy Families
<input type="checkbox"/> Veteran's Pension Benefits	

**Step 2.** If you do not participate in any of the programs listed in Step 1, you may still qualify for a discount based on annual household income. Complete this section by providing the information requested below. Include photocopies that document total gross household income based on one of the listed methods and include a completed Lifeline Household Worksheet.

<b>TOTAL MONTHLY GROSS INCOME: \$</b>	<b>NUMBER OF HOUSEHOLD MEMBERS:</b>
<input type="checkbox"/> Prior year's state or federal tax return.	<input type="checkbox"/> Current Annual Gross Income Statement from Employer
<input type="checkbox"/> Social Security statement of benefits	<input type="checkbox"/> Paycheck stubs or other official document containing income information for any 3 consecutive months within last 12 months
<input type="checkbox"/> Retirement/pension statement of benefits	<input type="checkbox"/> Veterans Administration statement of benefits
<input type="checkbox"/> Unemployment/Worker's Compensation Statement of Benefits	<input type="checkbox"/> Divorce decree or child support document containing income information

## APPLICANT ACKNOWLEDGEMENTS

PLEASE READ AND INITIAL EACH OF THE FOLLOWING STATEMENTS TO INDICATE THAT YOU UNDERSTAND AND AGREE:

- \_\_\_ I understand and consent to Lifeline Administration Service providing my Lifeline service account information, including but not limited to, my name, residential address, phone number, date of birth, the last 4 digits of my social security number, the date on which my Lifeline service was initiated/terminated, the amount of Lifeline support provided, and the means through which I qualified for Lifeline, to the Universal Service Administrative Company (USAC), USAC's agents and/or the National Lifeline Accountability Database to ensure the proper administration of the Lifeline program. I understand that if I fail to provide this consent, Lifeline Administration Service will deny me Lifeline service.
- \_\_\_ I certify that I meet either the income-based eligibility criteria in Step 1 or the program-based eligibility criteria in Step 2 above.
- \_\_\_ Lifeline is a non-transferable benefit and the subscriber may not transfer his or her benefit to any other person.
- \_\_\_ Lifeline is a federal benefit and willfully making false statements to obtain the benefit can result in fines, imprisonment, de-enrollment or being barred from the program.
- \_\_\_ Lifeline support is only available for a single phone line at my principal residence and no one else in my household is receiving Lifeline discounts. (A "household" is defined as any individual or group of individuals who live together at the same address and share income and expenses.)
- \_\_\_ Violation of the one-per-household limitation constitutes a violation of the Federal Communication Commission's rules and will result in the subscriber's de-enrollment from the program and potentially prosecution by the US government.
- \_\_\_ I understand that if I am identified as receiving more than one Lifeline benefit, all telephone service providers involved may be notified so that I may select one service and be de-enrolled from the other(s).
- \_\_\_ I will notify my telephone company within 30 days if I no longer qualify for Lifeline and I may be subject to penalties if I fail to do so.
- \_\_\_ I will notify my telephone company within 30 days of any changes to my residential address.
- \_\_\_ I will be required to certify my continued eligibility for Lifeline at least once a year and know failure to do so will result in termination of my participation in the program.
- \_\_\_ I understand that once I sign up for discounts with one provider, I cannot receive Lifeline benefits from another provider for a period of time. For voice-only services that qualify for Lifeline discounts, I cannot move benefits to another provider for 60 days. For broadband services that qualify for Lifeline discounts, I cannot move benefits to another provider for 12 months.

## APPLICANT SIGNATURE

I certify, under penalty of perjury, that the information provided in this application and supporting documentation is true and complete.

Signature:

Date:

REVISED 1/2017

**Michigan Lifeline Administration Service  
Lifeline Household Worksheet**

Lifeline Program support is a federal benefit that provides a monthly discount on home phone (i.e., landline phone) or cell phone service. **Only one Lifeline Program-supported service per household** is allowed under Federal law. Answer the questions on the following page to determine if there is more than one household living at your address, and if your household already receives a Lifeline Program benefit.

**Providing false information on this form may result in losing your Lifeline Program-supported service and possible criminal penalties.**

Your household is everyone who lives together at your address and contributes to, or shares in, the income and expenses of the household. Household expenses include food, health care expenses, and the cost of renting or paying a mortgage on your place of residence and utilities. Income includes salary, public assistance benefits, social security payments, pensions, unemployment compensation, veteran's benefits, inheritances, alimony, child support payments, worker's compensation benefits, gifts, and lottery winnings.

Members of a household are not permitted to receive more than one Lifeline Program-supported service. You are receiving a copy of this form because records indicate that more than one person at this address is receiving a Lifeline Program benefit. Each person at this address who receives a Lifeline Program benefit and has not yet completed and returned a household worksheet will receive a copy of this form, pre-populated with his/her name, address and telephone number.

If you **DO NOT** share income and expenses with the other adult(s) living at this address who receive Lifeline Program benefits, or there are no other adult(s) living at this address receiving Lifeline Program benefits, you **MUST STILL** sign this form to continue to receive your Lifeline Program benefit. If you fail to do so, you will be de-enrolled from your Lifeline Program benefit.

If you live with another adult(s) who shares income and expenses with you and who has a Lifeline Program benefit on his or her phone service, your household is receiving more than one Lifeline Program benefit. If so, you **MUST** take the following steps: (1) consult with the other adult(s) in your household currently receiving a Lifeline Program benefit and decide who will keep the Lifeline Program benefit for the household; and (2) the person who will keep the Lifeline Program benefit, **AND ONLY THAT PERSON** will fill out the form **IN FULL** and return it to his or her telephone service provider within 30 of days of the date of this communication. The telephone number listed on this form will be the number which will retain the Lifeline Program benefit.

**If the PERSON IN YOUR HOUSEHOLD WHO WISHES TO KEEP THE LIFELINE PROGRAM BENEFIT FOR THE ENTIRE HOUSEHOLD HAS ALREADY PROVIDED a household worksheet to their service provider, then NO FURTHER ACTION IS NECESSARY. (The person named below does not need to sign and send this form to their Lifeline provider).**

**After 30 days of the date of this letter, all other subscribers at this address below who have not completed a household worksheet will NO LONGER have a Lifeline Program benefit.**

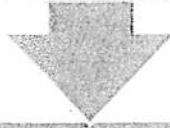
Name \_\_\_\_\_ Telephone Number \_\_\_\_\_

Address \_\_\_\_\_  
Street Apt. City State Zip

**1. Does your husband, wife, or domestic partner living at your address have a Lifeline Program-discounted phone service?**

☐ No. Please answer question 2 below.

☐ Yes. If YOU are the person who will keep the Lifeline benefit, check **OPTION B** at the bottom and sign this Form. If you are not keeping your Lifeline benefit, **DO NOT** submit this form.



**2. Does another adult (age 18 or older, or emancipated minor) live with you AND have a Lifeline Program-discounted phone service?**

☐ No. Please check **OPTION A** below and **SIGN THIS FORM.**

☐ YES. Please answer question 3 below.



**3. Do you share expenses for bills, food, or other living expenses AND share income with the person in question #2?**

☐ No. Please check **OPTION C** below and **SIGN THIS FORM.**

☐ Yes. If YOU are the person who will keep the Lifeline Program benefit, check **OPTION B** at the bottom and sign this form. If you are not keeping your Lifeline benefit, **DO NOT** submit this form.

Please check the box below for the one that applies to you:

OPTION A. [ ☐ ] No one in my household, other than myself, is currently receiving a Lifeline Program benefit and therefore I may continue to receive a Lifeline Program benefit.

OPTION B. [ ☐ ] There are others in my household that are currently receiving a Lifeline Program benefit; by signing this form, I will be the only member of this household to continue to receive a Lifeline Program benefit.

OPTION C. [ ☐ ] There are other adults who reside at the above listed address who receive a Lifeline Program benefit but do not share income and expenses with me, therefore since I am the only member in my household receiving a Lifeline Program benefit, I may continue to receive that benefit.

I certify that the information provided above is true. I understand that violating the one-per-household requirement is against the Federal Communications Commission's rules and I may lose my Lifeline Program benefits, and may be prosecuted by the United States government for violating the rules.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please return the signed form to [Insert Company Name] at [address, email, fax]

LOCAL EXCHANGE SERVICE

Exchange: Bloomington

The rates below entitle the customer to call all stations bearing the designation of a central office of the following exchanges that comprise the Local Service Area: (C)  
(C)

BLOOMINGDALE	ALLEGAN	GOBLES	PAW PAW	(C)
GRAND JCT	BANGOR	PULLMAN		(C)

Bloomington will block calls dialed 1-plus to stations within the Bloomington, Allegan, Gobles, Paw Paw, Grand Jct, Bangor, Pullman exchanges. Bloomington will treat calls dialed without 1-plus (7-digit dialed) as local calls and Bloomington will bill those calls according to this tariff.

Calls made to a telephone number with an NPA NXX that is associated with the rate center that is within the customer's local calling area are local calls regardless of the physical location of the called party. (N)  
(N)

MONTHLY RATES<sup>1</sup> (C)

For calling within the Local Service Area (C)

Class of Service

Residence 1-Party Line	<u>ALL</u> \$21.40*	(I)
------------------------	------------------------	-----

	<u>NON-EDUCATIONAL</u>		<u>EDUCATIONAL</u>	
	<u>6 or fewer lines</u>	<u>7 or more lines</u>		
Business 1-Party Line	\$22.63*	\$20.13	\$20.13*	(I)
PBX Trunk	\$28.47*	\$25.97*	\$25.97*	(I)

Basic local exchange service installed after December 31, 2001, will include touch calling service at no additional charge above the rates listed for the class of service installed. Residence 1-Party Line, Business 1-Party Line and PBX Trunk lines in service at January 1, 2002, that did not have touch calling service as an auxiliary service at the end of business December 31, 2001 will receive a monthly credit of \$2.00 during the period that line is in continual service after December 31, 2001 and touch calling service is not affirmatively added as an auxiliary service. If an end user's actions cause the disconnection of a line for any reason (such as nonpayment of a bill for regulated services, change of class of service or movement to vacation rate) that line will not qualify for any future touch calling service credit.

<sup>1</sup> The charges for basic local exchange service and end user access line charge were integrated and rates were increased effective January 1, 2002. (C)  
(C)

\* Local MOU charges are specified on Sheet 5.4 of this tariff

Michigan Public  
Service Commission

01/23/2008

Approved

Issued: October 4, 2007

Effective: October 6, 2007

Issued under the authority of Public Act 179 of 1991 as amended

Sidney Shank, General Manager  
PO Box 187  
Bloomington, MI 49026-0187  
(269) 521-7340, sshank@btc-bci.com

LOCAL EXCHANGE SERVICE  
BOUNDARY DESCRIPTION

Bloomington Exchange:

Exchange Area

Beginning at the east 1/8 post of the northwest 1/4 of Section 10, T2S, R14W, Waverly Township, Van Buren County, west to a point 1/10 mile east of 44th Avenue, north to a point 1/10 north of 28th Avenue, west to the west line of Section 6, north to the east 1/4 post of Section 1, Arlington Township, west to the center Section 1, north to 24th Avenue, north along the centerline of 47th Street to the east-west 1/4 line of Section 25, Columbia Township, west to a point 1/10 mile east of the west line of Section 25, north to a point 1/10 mile south of the north line of Section 25, west to a point 1/10 mile east of the west line of Section 26, north to a point 1/10 mile north of the south line of Section 11, east to the north-south 1/4 line of Section 11, north to a point 1/10 mile north of 109 Avenue in Section 12, Lee Township, Allegan County, east to a point 1/10 mile east of the west line of Section 7, Cheshire Township, north to the north line of Section 31, Valley Township, east to the north 1/4 post of Section 33, south to a point 1/10 mile north of the south line of Section 9, Cheshire Township, east to the east line of Section 10, south to a point 1/10 mile south of the southwest corner of Section 11, east to the north-south 1/8 line of the northeast 1/4 of Section 14, south to a point 1/10 mile north of Base Line Road, southeasterly, remaining 1/10 mile north of said road to a point 1/10 mile west of the east line of Section 2 - extended, Bloomington Township, Van Buren, south to the east-west 1/4 line of Section 14, west to the south 1/8 post of the northwest 1/4 of Section 14, south to a point 1/10 mile south of the north line of Section 35, west to the north-south 1/4 line of Section 34, south to the point of beginning.

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Issued: February 24, 1993

Effective: March, 22, 1993

Issued under the authority of the Michigan Public Service  
Commission Order dated December 22, 1992, in Case No. U-10064.

By: Thomas Beltz, General Manager

Bloomington, Michigan

LOCAL EXCHANGE SERVICE

LOCAL MOU RATE

(N)

For calls dialed to a station bearing the designation of a central office within the Bloomington exchange, the Company will charge the following:

First 2,000 Conversation MOU in each billing period	\$0.00 per Conversation MOU
Each Conversation MOU over 2,000 in that billing period	\$0.00 per Conversation MOU

For calls dialed to a station bearing the designation of Allegan, Gobles, Paw Paw, Grand Jct, Bangor, Pullman, the Company will charge the following:

First 2,000 Conversation MOU in each billing period	\$0.00 per Conversation MOU
Each Conversation MOU over 2,000 in that billing period	\$0.04 per Conversation MOU

The Company will measure Conversation MOU from the time when the Company's switching equipment receives answer supervision to the earlier of when the Company's switch receives disconnect supervision from the Bloomington switch or from the terminating switch.

The Company will measure local Conversation MOU to the nearest whole MOU per call.

The Company will not bill the end user for non-conversation time related to local calls.

Local Conversation MOU do not include 1-plus, 0-plus or 0-minus calls.

The Company will not provide call record detail for local usage.

No MOU are carried forward from month to month.

(N)

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Issued: January 21, 2003

Effective: February 1, 2003

Issued under the authority of the Michigan Public Service Commission  
Order dated November 7, 2002, in Case No. U-13515 and  
PA 179, Michigan Telecommunications Act, as amended

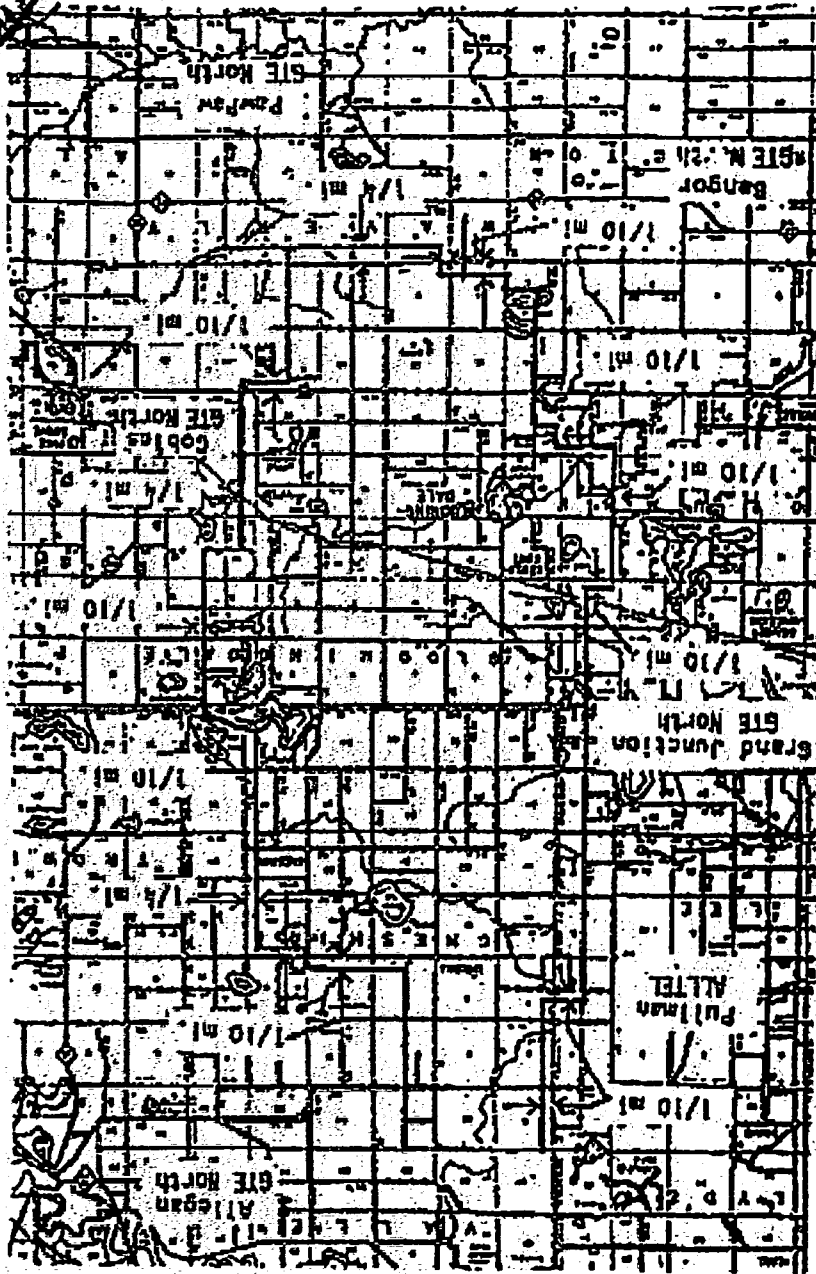
By: Sidney Sue Shank, General Manager

Bloomington, Michigan

Original Sheet No. 5.1

Original Sheet No. 5.1

LOCAL EXCHANGE SERVICE



77

708

Issued: February 24, 1973

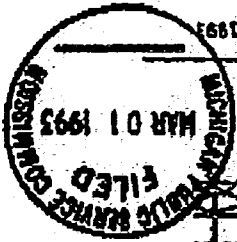
REF ID: A6120113 DATE: 22, 1997

Issued under the authority of the Michigan Public Service Commission order dated December 22, 1952. In Case No. U-1064.

Thomas Bates, General Manager

31.06.1975. 11.07.1975

●





LOCAL TELEPHONE EXCHANGE SERVICE

LIFELINE SERVICE

A. DESCRIPTION

1. Lifeline Service applies discounts to monthly recurring rates for qualifying residential customers. These discounts are applied to existing tariffed rates and charges for residential telephone service.
2. In order to be eligible for Lifeline Service a residential customer's household income must be at or below 150% of the poverty level as determined by the United States Office of Management and Budget and as approved by the State Treasurer or the customer must participate in one of the following federal assistance programs:
  - a. Medicaid
  - b. Supplemental Nutrition Assistance Program (SNAP) - Food stamps
  - c. Supplemental Security Income (SSI)
  - d. Federal Public Housing Assistance/Section 8
  - e. Low Income Home Energy Assistance Program (LIHEAP)
  - f. National School Lunch Program's free lunch program
  - g. Temporary Assistance for Needy Families (TANF) aka Family Independence Program
3. Lifeline Service includes the services and functionalities enumerated in by the F.C.C. as follows: voice grade access to the public switched network; local usage; dual tone multi-frequency signaling or its functional equivalent; single-party service or its functional equivalent; access to operator services; access to interexchange service; access to directory assistance; and toll blocking for qualifying customers.
4. Other services can be provided with the Lifeline Service at applicable rates and charges.

(C)  
|  
(C)

B. REGULATIONS

1. Regulations specified elsewhere in the Company's tariffs apply to Lifeline Service.
2. Lifeline Service is available only with residence services, excluding foreign exchange service. Lifeline Service is limited to one line per household at the customer's primary residence.
3. A miscellaneous service charge does not apply when Lifeline Service is added or discontinued to existing service when that is the only work being done.
4.
  - a. A discount of 20% of the Basic Local Exchange rate or \$11.25, whichever is greater, on the monthly rate for Basic Local Exchange Service for Lifeline customers is applicable. For Lifeline customers 65 years of age or more, the discount will be 25% of the Basic Local Exchange rate or \$12.35, whichever is greater. The total discount shall not exceed 100% of all end-user common line charges and the Basic Local Exchange rate.
  - b. The credit will be applied in the following order: (1) The Interstate End User Access Charge, National Exchange Carriers Association, Inc. Tariff F.C.C. No. 5, Access Service. (2) The Access Recovery Charge, National Exchange Carrier Association, Inc. Tariff F.C.C. No. 5, Access Service, and (3) The balance of the credit, if any, will be applied as a credit to the Basic Local Exchange rate.
  - c. The Company will provide, at the qualifying customer's option, toll blocking service at no charge. The Company defines toll blocking as a service provided by the Company that lets the customer elect not to allow the completion of outgoing toll calls from their telecommunications channel.
  - d. The Company will not require a service deposit in order to initiate Lifeline Service if the qualifying customer voluntarily elects toll blocking service.
  - e. The Company will not disconnect Lifeline Service for non-payment of toll charges by qualifying customers.
5. The Lifeline plan will apply after receipt and processing of a completed Company or community/government provided application, including documentation indicating that the household income meets the eligibility standards established above.
6. Customers of Lifeline Service must notify the Company of any changes which would affect qualification. Reverification of eligibility will take place on an ongoing basis. When the customer is no longer eligible for Lifeline service, the Lifeline discount would be discontinued and regular tariff rates and charges would apply.

(C)  
(C)  
(C)

Issued: November 27, 2013

Effective: December 2, 2013

Issued under the authority of Public Act 179 of 1991 as amended,  
and Case No. U-17019

Mark Bahnson, CEO/General Manager  
Bloomington Communications, Inc.  
101 W. Kalamazoo St. - PO Box 187  
Bloomington, MI 49026

(269) 521-7316  
markb@bloomingtondalecom.net

**RECEIVED**

**By Patti Witte at 9:14 am, Dec 02, 2013**

LOCAL TELEPHONE EXCHANGE SERVICE

LIFELINE SERVICE

C. MONTHLY RATE FOR NON LIFELINE CUSTOMERS

A rate specified in Michigan Exchange Carrier Association (MECA) Tariff M.P.S.C No. 25(U) Part XVII applies (C)  
per exchange access line to cover the costs of the Lifeline service, to the Telephone Company intrastate  
services as listed below:

- Business and Residence exchange services excluding Lifeline customers.
- PBX Trunk Services
- Centrex Services

(D)

(D)

---

Issued: November 27, 2013

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(269) 521-7316  
markb@bloomingtoncom.net

**RECEIVED**

**By Patti Witte at 9:14 am, Dec 02, 2013**

Max TV, Telephone and Internet 3Mb /768Kb \$139.99

Telephone includes Local Phone Service, Voice Mail, Caller ID and Call Waiting. Faster Internet speeds are available, call (269) 521-7300 for details.

## **a La Carte Services**

### **Internet**

1.5Mb/512Kb \$39.95  
3Mb/768Kb \$49.95  
10Mb/1Mb\* \$59.95  
20Mb/1Mb\* \$69.95  
Modem Lease \$6.99

### **Voice**

Local Telephone Service \$21.40  
100 Min Long Distance \$ 3.99  
200 Min Long Distance \$ 6.99  
400 Min Long Distance \$ 9.99  
2500 Min Long Distance \$12.99

Long Distance plan minutes overage are billed at 6.9 cents per minute. Unused minutes will expire at the end of each month and do not carry over.

### **Video**

Not available a La Carte  
HBO \$16.99  
Cinemax \$13.99  
Starz \$12.99

Additional Set Top Boxes \$6.99  
Wire Maintenance Plus \$5.99  
NON-Phone DSL fee \$15.00

\* Where available. Prices do not include applicable taxes and fees.  
Taxes and fees may vary by county. Prices subject to change.

- 

- [Home](#)
- [Subscribers](#)
- [Specials](#)
- [Services](#)
- [Business](#)

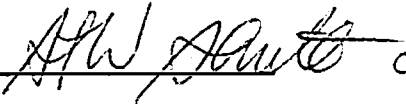
**CERTIFICATION OF BLOOMINGDALE TELEPHONE COMPANY**

**Reporting Period January 1 – December 31, 2016**

**Sec. 54.313(f)(1)(iii) Milestone Certification**

Pursuant to § 54.313 f)(1)(iii) for Rate-of-Return Carriers, Carrier hereby certifies it is taking reasonable steps to provide upon reasonable request broadband service at actual speeds of at least 10 Mbps downstream/1 Mbps upstream, with latency suitable for real-time applications, including Voice over Internet Protocol, and usage capacity that is reasonably comparable to comparable offerings in urban areas as determined in an annual survey, and that requests for such service are met within a reasonable amount of time.

I verify that the foregoing is true and correct. Executed on June 19, 2017.

/s/  CPA

Steven W. Shults, CPA Assistant Treasurer

Bloomington Telephone Company

SAC: 310679

USDA-RUS

This data will be used by RUS to review your financial situation. Your response is required by 7 U.S.C. 901 et seq. and, subject to federal laws and regulations regarding confidential information, will be treated as confidential.

**OPERATING REPORT FOR  
TELECOMMUNICATIONS BORROWERS**

BORROWER NAME

Bloomington Telephone Company, Inc.

(Prepared with Audited Data)

INSTRUCTIONS-Submit report to RUS within 30 days after close of the period.  
For detailed instructions, see RUS Bulletin 1744-2. Report in whole dollars only.

PERIOD ENDING  
December, 2016

BORROWER DESIGNATION  
MI 0527

**CERTIFICATION**

We hereby certify that the entries in this report are in accordance with the accounts and other records of the system and reflect the status of the system to the best of our knowledge and belief.

ALL INSURANCE REQUIRED BY 7 CFR PART 1788, CHAPTER XVII, RUS, WAS IN FORCE DURING THE REPORTING PERIOD AND RENEWALS HAVE BEEN OBTAINED FOR ALL POLICIES.

DURING THE PERIOD COVERED BY THIS REPORT PURSUANT TO PART 1788 OF 7CFR CHAPTER XVII  
(Check one of the following)

☐ All of the obligations under the RUS loan documents have been fulfilled in all material respects.

☐ There has been a default in the fulfillment of the obligations under the RUS loan documents. Said default(s) is/are specifically described in the Telecom Operating Report

DATE

**PART A. BALANCE SHEET**

ASSETS	BALANCE PRIOR YEAR	BALANCE END OF PERIOD	LIABILITIES AND STOCKHOLDERS' EQUITY	BALANCE PRIOR YEAR	BALANCE END OF PERIOD
<b>CURRENT ASSETS</b>			<b>CURRENT LIABILITIES</b>		
1. Cash and Equivalents			25. Accounts Payable		
2. Cash-RUS Construction Fund			26. Notes Payable		
3. Affiliates:			27. Advance Billings and Payments		
a. Telecom, Accounts Receivable			28. Customer Deposits		
b. Other Accounts Receivable			29. Current Mat. L/T Debt		
c. Notes Receivable			30. Current Mat. L/T Debt-Rur. Dev.		
4. Non-Affiliates:			31. Current Mat.-Capital Leases		
a. Telecom, Accounts Receivable			32. Income Taxes Accrued		
b. Other Accounts Receivable			33. Other Taxes Accrued		
c. Notes Receivable			34. Other Current Liabilities		
5. Interest and Dividends Receivable			35. Total Current Liabilities (25 thru 34)		
6. Material-Regulated			<b>LONG-TERM DEBT</b>		
7. Material-Nonregulated			36. Funded Debt-RUS Notes		
8. Prepayments			37. Funded Debt-RTB Notes		
9. Other Current Assets			38. Funded Debt-FFB Notes		
10. Total Current Assets (1 Thru 9)			39. Funded Debt-Other		
<b>NONCURRENT ASSETS</b>			40. Funded Debt-Rural Develop. Loan		
11. Investment in Affiliated Companies			41. Premium (Discount) on L/T Debt		
a. Rural Development			42. Recquired Debt		
b. Nonrural Development			43. Obligations Under Capital Lease		
12. Other Investments			44. Adv. From Affiliated Companies		
a. Rural Development			45. Other Long-Term Debt		
b. Nonrural Development			46. Total Long-Term Debt (36 thru 45)		
13. Nonregulated Investments			<b>OTHER LIAB. &amp; DEF. CREDITS</b>		
14. Other Noncurrent Assets			47. Other Long-Term Liabilities		
15. Deferred Charges			48. Other Deferred Credits		
16. Jurisdictional Differences			49. Other Jurisdictional Differences		
17. Total Noncurrent Assets (11 thru 16)			50. Total Other Liabilities and Deferred Credits (47 thru 49)		
<b>PLANT, PROPERTY, AND EQUIPMENT</b>			<b>EQUITY</b>		
18. Telecom, Plant-in-Service			51. Cap. Stock Outstand. & Subscribed		
19. Property Held for Future Use			52. Additional Paid-in-Capital		
20. Plant Under Construction			53. Treasury Stock		
21. Plant Adj., Nonop. Plant & Goodwill			54. Membership and Cap. Certificates		
22. Less Accumulated Depreciation			55. Other Capital		
23. Net Plant (18 thru 21 less 22)			56. Patronage Capital Credits		
24. TOTAL ASSETS (10+17+23)			57. Retained Earnings or Margins		
			58. Total Equity (51 thru 57)		
			59. TOTAL LIABILITIES AND EQUITY (35+46+50+58)		

Total Equity = % of Total Assets

USDA-RUS  <b>OPERATING REPORT FOR TELECOMMUNICATIONS BORROWERS</b>		BORROWER DESIGNATION  MI0527	
INSTRUCTIONS- See RUS Bulletin 1744-2		PERIOD ENDING  December, 2016	
<b>PART B. STATEMENTS OF INCOME AND RETAINED EARNINGS OR MARGINS</b>			
ITEM	PRIOR YEAR	THIS YEAR	
1. Local Network Services Revenues			
2. Network Access Services Revenues			
3. Long Distance Network Services Revenues			
4. Carrier Billing and Collection Revenues			
5. Miscellaneous Revenues			
6. Uncollectible Revenues			
7. Net Operating Revenues (1 thru 5 less 6)			
8. Plant Specific Operations Expense			
9. Plant Nonspecific Operations Expense (Excluding Depreciation & Amortization)			
10. Depreciation Expense			
11. Amortization Expense			
12. Customer Operations Expense			
13. Corporate Operations Expense			
14. Total Operating Expenses (8 thru 13)			
15. Operating Income or Margins (7 less 14)			
16. Other Operating Income and Expenses			
17. State and Local Taxes			
18. Federal Income Taxes			
19. Other Taxes			
20. Total Operating Taxes (17+18+19)			
21. Net Operating Income or Margins (15+16-20)			
22. Interest on Funded Debt			
23. Interest Expense - Capital Leases			
24. Other Interest Expense			
25. Allowance for Funds Used During Construction			
26. Total Fixed Charges (22+23+24-25)			
27. Nonoperating Net Income			
28. Extraordinary Items			
29. Jurisdictional Differences			
30. Nonregulated Net Income			
31. Total Net Income or Margins (21+27+28+29+30-26)			
32. Total Taxes Based on Income			
33. Retained Earnings or Margins Beginning-of-Year			
34. Miscellaneous Credits Year-to-Date			
35. Dividends Declared (Common)			
36. Dividends Declared (Preferred)			
37. Other Debits Year-to-Date			
38. Transfers to Patronage Capital			
39. Retained Earnings or Margins End-of-Period [(31+33+34) - (35+36+37+38)]			
40. Patronage Capital Beginning-of-Year			
41. Transfers to Patronage Capital			
42. Patronage Capital Credits Retired			
43. Patronage Capital End-of-Year (40+41-42)			
44. Annual Debt Service Payments			
45. Cash Ratio [(14+20-10-11) / 7]			
46. Operating Accrual Ratio [(14+20+26) / 7]			
47. TIER [(31+26) / 26]			
48. DSCR [(31+26+10+11) / 44]			

USDA-RUS

# **OPERATING REPORT FOR TELECOMMUNICATIONS BORROWERS**

INSTRUCTIONS - See RUS Bulletin 1744-2

BORROWER DESIGNATION

MI0527

PERIOD ENDED

December, 2016

## **Part C. SUBSCRIBER (ACCESS LINE), ROUTE MILE, & HIGH SPEED DATA INFORMATION**

EXCHANGE	1. RATES		2. SUBSCRIBERS (ACCESS LINES)			3. ROUTE MILES	
	B-1	R-1	BUSINESS	RESIDENTIAL	TOTAL	TOTAL (including fiber)	FIBER
	(a)	(b)	(a)	(b)	(c)	(a)	(b)
521							
MobileWireless					0		
Route Mileage Outside Exchange Area						0.00	0.00
Total							
No. Exchanges							

USDA-RUS

# **OPERATING REPORT FOR TELECOMMUNICATIONS BORROWERS**

INSTRUCTIONS - See RUS Bulletin 1744-2

BORROWER DESIGNATION

MI0527

PERIOD ENDED

December, 2016

## **Part C. SUBSCRIBER (ACCESS LINE), ROUTE MILE, & HIGH SPEED DATA INFORMATION**

### **4. BROADBAND SERVICE**

Details on Least Expensive Broadband Service								
EXCHANGE	No. Access Lines with BB available (a)	No Of Broadband Subscribers (b)	Number Of Subscribers (c)	Advertised Download Rate (Kbps) (d)	Advertised Upload Rate (Kbps) (e)	Price Per Month (f)	Standalone/Pckg (f)	Type Of Technology (g)
521								
Total								



<b>USDA-RUS</b>  <b>OPERATING REPORT FOR</b> <b>TELECOMMUNICATIONS BORROWERS</b>			<b>BORROWER DESIGNATION</b> MI0527  <b>PERIOD ENDING</b> December, 2016		
<i>INSTRUCTIONS- See RUS Bulletin 1744-2</i>					
<b>PART D. SYSTEM DATA</b>					
1. No. Plant Employees	2. No. Other Employees	3. Square Miles Served	4. Access Lines per Square Mile	5. Subscribers per Route Mile	
<b>PART E. TOLL DATA</b>					
1. Study Area ID Code(s)  a. <input type="text"/> b. <input type="text"/> c. <input type="text"/> d. <input type="text"/> e. <input type="text"/> f. <input type="text"/> g. <input type="text"/> h. <input type="text"/> i. <input type="text"/> j. <input type="text"/>		2. Types of Toll Settlements (Check one)  <div style="display: flex; justify-content: space-between;"> <div>             Interstate: <input type="checkbox"/> Average Schedule               Intrastate: <input type="checkbox"/> Average Schedule           </div> <div> <input checked="" type="checkbox"/> Cost Basis   <input checked="" type="checkbox"/> Cost Basis           </div> </div>			
<b>PART F. FUNDS INVESTED IN PLANT DURING YEAR</b>					
1. RUS, RTB, & FFB Loan Funds Expended					
2. Other Long-Term Loan Funds Expended					
3. Funds Expended Under RUS Interim Approval					
4. Other Short-Term Loan Funds Expended					
5. General Funds Expended (Other than Interim)					
6. Salvaged Materials					
7. Contribution in Aid to Construction					
8. Gross Additions to Telecom. Plant (1 thru 7)					
<b>PART G. INVESTMENTS IN AFFILIATED COMPANIES</b>					
INVESTMENTS  (a)	CURRENT YEAR DATA		CUMULATIVE DATA		
	Investment This Year (b)	Income/Loss This Year (c)	Cumulative Investment To Date (d)	Cumulative Income/Loss To Date (e)	Current Balance (f)
1. Investment in Affiliated Companies - Rural Development					
2. Investment in Affiliated Companies - Nonrural Development					

<b>USDA-RUS</b>  <b>OPERATING REPORT FOR</b> <b>TELECOMMUNICATIONS BORROWERS</b>	<b>BORROWER DESIGNATION</b> MI0527  <b>PERIOD ENDING</b> December, 2016
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<b>PART H. CURRENT DEPRECIATION RATES</b>	
Are corporation's depreciation rates approved by the regulatory authority with jurisdiction over the provision of telephone services? (Check one) <span style="float: right;"> <input type="checkbox"/> YES    <input checked="" type="checkbox"/> NO         </span>	

EQUIPMENT CATEGORY	DEPRECIATION RATE
1. Land and support assets - Motor Vehicles	██████
2. Land and support assets - Aircraft	██████
3. Land and support assets - Special purpose vehicles	██████
4. Land and support assets - Garage and other work equipment	██████
5. Land and support assets - Buildings	██████
6. Land and support assets - Furniture and Office equipment	██████
7. Land and support assets - General purpose computers	██████
8. Central Office Switching - Digital	██████
9. Central Office Switching - Analog & Electro-mechanical	██████
10. Central Office Switching - Operator Systems	██████
11. Central Office Transmission - Radio Systems	██████
12. Central Office Transmission - Circuit equipment	██████
13. Information origination/termination - Station apparatus	██████
14. Information origination/termination - Customer premises wiring	██████
15. Information origination/termination - Large private branch exchanges	██████
16. Information origination/termination - Public telephone terminal equipment	██████
17. Information origination/termination - Other terminal equipment	██████
18. Cable and wire facilities - Poles	██████
19. Cable and wire facilities - Aerial cable - Metal	██████
20. Cable and wire facilities - Aerial cable - Fiber	██████
21. Cable and wire facilities - Underground cable - Metal	██████
22. Cable and wire facilities - Underground cable - Fiber	██████
23. Cable and wire facilities - Buried cable - Metal	██████
24. Cable and wire facilities - Buried cable - Fiber	██████
25. Cable and wire facilities - Conduit systems	██████
26. Cable and wire facilities - Other	██████

USDA-RUS  <b>OPERATING REPORT FOR TELECOMMUNICATIONS BORROWERS</b>		BORROWER DESIGNATION MI0527
INSTRUCTIONS – See help in the online application.		PERIOD ENDED December, 2016
<b>PART I – STATEMENT OF CASH FLOWS</b>		
<b>1. Beginning Cash (Cash and Equivalents plus RUS Construction Fund)</b>		[REDACTED]
<b>CASH FLOWS FROM OPERATING ACTIVITIES</b>		
<b>2. Net Income</b>		[REDACTED]
<i>Adjustments to Reconcile Net Income to Net Cash Provided by Operating Activities</i>		
<b>3. Add: Depreciation</b>		[REDACTED]
<b>4. Add: Amortization</b>		[REDACTED]
<b>5. Other (Explain)</b>		
<i>Changes in Operating Assets and Liabilities</i>		
<b>6. Decrease/(Increase) in Accounts Receivable</b>		[REDACTED]
<b>7. Decrease/(Increase) in Materials and Inventory</b>		[REDACTED]
<b>8. Decrease/(Increase) in Prepayments and Deferred Charges</b>		[REDACTED]
<b>9. Decrease/(Increase) in Other Current Assets</b>		[REDACTED]
<b>10. Increase/(Decrease) in Accounts Payable</b>		[REDACTED]
<b>11. Increase/(Decrease) in Advance Billings &amp; Payments</b>		[REDACTED]
<b>12. Increase/(Decrease) in Other Current Liabilities</b>		[REDACTED]
<b>13. Net Cash Provided/(Used) by Operations</b>		[REDACTED]
<b>CASH FLOWS FROM FINANCING ACTIVITIES</b>		
<b>14. Decrease/(Increase) in Notes Receivable</b>		[REDACTED]
<b>15. Increase/(Decrease) in Notes Payable</b>		[REDACTED]
<b>16. Increase/(Decrease) in Customer Deposits</b>		[REDACTED]
<b>17. Net Increase/(Decrease) in Long Term Debt (Including Current Maturities)</b>		[REDACTED]
<b>18. Increase/(Decrease) in Other Liabilities &amp; Deferred Credits</b>		[REDACTED]
<b>19. Increase/(Decrease) in Capital Stock, Paid-in Capital, Membership and Capital Certificates &amp; Other Capital</b>		[REDACTED]
<b>20. Less: Payment of Dividends</b>		[REDACTED]
<b>21. Less: Patronage Capital Credits Retired</b>		[REDACTED]
<b>22. Other (Explain)</b>		
<b>23. Net Cash Provided/(Used) by Financing Activities</b>		[REDACTED]
<b>CASH FLOWS FROM INVESTING ACTIVITIES</b>		
<b>24. Net Capital Expenditures (Property, Plant &amp; Equipment)</b>		[REDACTED]
<b>25. Other Long-Term Investments</b>		[REDACTED]
<b>26. Other Noncurrent Assets &amp; Jurisdictional Differences</b>		[REDACTED]
<b>27. Other (Explain)</b>		[REDACTED]
<b>28. Net Cash Provided/(Used) by Investing Activities</b>		[REDACTED]
<b>29. Net Increase/(Decrease) in Cash</b>		[REDACTED]
<b>30. Ending Cash</b>		[REDACTED]

Revision Date 2010

<b>USDA-RUS</b>  <b>OPERATING REPORT FOR TELECOMMUNICATIONS BORROWERS</b>	<b>BORROWER DESIGNATION</b>  MI0527
<b>INSTRUCTIONS - See RUS Bulletin 1744-2</b>	<b>PERIOD ENDED</b> December, 2016
<b>NOTES TO THE OPERATING REPORT FOR TELECOMMUNICATIONS BORROWERS</b>	

<div>USDA-RUS</div> <div>OPERATING REPORT FOR TELECOMMUNICATIONS BORROWERS</div>	<div>BORROWER DESIGNATION</div> <div>MI0527</div>
<div>INSTRUCTIONS - See RUS Bulletin 1744-2</div>	<div>PERIOD ENDED</div> <div>December, 2016</div>
<div>CERTIFICATION LOAN DEFAULT NOTES TO THE OPERATING REPORT FOR TELECOMMUNICATIONS BORROWERS</div>	

**Independent Auditor's Report on Internal Control  
Over Financial Reporting and on Compliance and  
Other Matters Based on an Audit  
of the Consolidated Financial Statements Performed in  
Accordance With *Government Auditing Standards***

To the Board of Directors  
Bloomingdale Telephone Company, Inc. and Subsidiaries  
Bloomingdale, Michigan

We have audited, in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States, the consolidated financial statements of Bloomingdale Telephone Company, Inc. and subsidiaries, which comprise the consolidated balance sheet as of December 31, 2016, and the related consolidated statements of income, stockholders' equity and cash flows for the year then ended, and the related notes to the financial statements, and have issued our report thereon dated April 3, 2017.

***Internal Control Over Financial Reporting***

Management of the Company is responsible for establishing and maintaining effective internal control over financial reporting (internal control). In planning and performing our audit of the consolidated financial statements, we considered the Company's internal control to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the consolidated financial statements, but not for the purpose of expressing an opinion on the effectiveness of the Company's internal control. Accordingly, we do not express an opinion on the effectiveness of the Company's internal control.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent or detect and correct misstatements on a timely basis. A material weakness is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the Company's consolidated financial statements will not be prevented or detected and corrected on a timely basis. A significant deficiency is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies and therefore, material weaknesses or significant deficiencies may exist that were not identified. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. We identified a deficiency in internal control described in the accompanying schedule of findings and responses that we consider to be a significant deficiency in internal control.

- **Criteria:** Complete segregation of duties and a formal risk assessment process are essential in maintaining internal controls over financial reporting and managing the information technology system of the Company.

**Condition:** The Company's limited resources and personnel do not allow for complete segregation of duties or a formal risk assessment and monitoring system.

**Cause:** The company has a limited number of personnel and it therefore is not able to dedicate the required resources to maintain complete segregation of duties or prepare formal risk assessment and monitoring systems.

**Effect:** Due to the lack of a formal internal control and information technology system and segregation of duties, there is a potential for an employee to perpetrate and conceal a theft of assets from the Company.

**Recommendation:** Complete segregation of incompatible duties in the accounting department may not be possible at the current staffing levels. Management and those charged with governance should be aware of the limitations of the internal control system as currently implemented and should remain alert for opportunities to improve the segregation of duties through the reallocation of duties or reassignment of responsibilities.

### ***Compliance and Other Matters***

As part of obtaining reasonable assurance about whether the Company's financial statements are free of material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements, noncompliance with which could have a direct and material effect on the determination of consolidated financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit and, accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

### ***Management's Response to Findings***

**Significant Deficiency:** The Company periodically performs an informal risk assessment and monitors the business risk associated with the assignment of personnel to various activities.

The Company's response to the findings identified in our audit is described in the accompanying schedule of findings and responses. Management's response was not subjected to the auditing procedures applied in the audit of the consolidated financial statements and, accordingly, we express no opinion on it.

To the Board of Directors  
Bloomington Telephone Company, Inc. and Subsidiaries  
Page 26

***Purpose of this Report***

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the entity's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the Company's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

***BKD, LLP***

West Des Moines, Iowa  
April 3, 2017



**Independent Auditor's Report on Compliance with Aspects  
of Contractual Agreements and Regulatory Requirements  
For Telecommunications Borrowers**

To the Board of Directors  
Bloomingdale Telephone Company, Inc. and Subsidiaries  
Bloomingdale, Michigan

We have audited, in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of Bloomingdale Telephone Company, Inc. and subsidiaries, which comprise the balance sheet as of December 31, 2016, and the related statements of income, stockholders' equity and cash flows for the year then ended, and the related notes to the financial statements, and have issued our report thereon dated April 3, 2017. In accordance with *Government Auditing Standards*, we have also issued our report dated April 3, 2017, on our consideration of Bloomingdale Telephone Company, Inc.'s internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements and other matters. No reports other than the reports referred to above and our schedule of findings and recommendations related to our audit have been furnished to management.

In connection with our audit, nothing came to our attention that caused us to believe that Bloomingdale Telephone Company, Inc. failed to comply with the terms, covenants, provision, or conditions of their loan, grant, and security instruments as set forth in 7 CFR Part 1773, *Policy on Audits of Rural Utilities Service Borrowers*, §1773.33 and the clarified RUS policy memorandum dated February 7, 2014, insofar as they relate to accounting matters as enumerated below. However, our audit was not directed primarily toward obtaining knowledge of noncompliance. Accordingly, had we performed additional procedures, other matters may have come to our attention regarding Bloomingdale Telephone Company, Inc.'s noncompliance with the above-referenced terms, covenants, provisions or conditions of the contractual agreements and regulatory requirements, insofar as they relate to accounting matters. In connection with our audit, we noted no matters regarding Bloomingdale Telephone Company, Inc.'s accounting and records to indicate that Bloomingdale Telephone Company, Inc. did not:

- Maintain adequate and effective accounting procedures;
- Utilize adequate and fair methods for accumulating and recording labor, material and overhead costs, and the distribution of these costs to construction, retirement and maintenance or other expense accounts;
- Reconcile continuing property records to the controlling general ledger plant accounts;

- Clear construction accounts and accrue depreciation on completed construction;
- Record and properly price the retirement of plant;
- Seek the approval of the sale, lease or transfer of capital assets and disposition of proceeds for the sale or lease of plant, material or scrap;
- Maintain adequate control over materials and supplies;
- Prepare accurate and timely Financial and Operating Reports;
- Obtain written approval to enter into any contract for the management, operation, or maintenance of the borrower's system if the contract covers substantially all of the telecommunications system;
- Disclose material related party transactions in the financial statements, in accordance with requirements for related parties in generally accepted accounting principles;
- Record depreciation in accordance with RUS requirements;
- Comply with the requirements for the detailed schedule of investments.

**Bloomingdale Telephone Company, Inc. and Subsidiaries**  
**Schedule of Subsidiary Investments**  
**December 31, 2016 and 2015**

<u>Entity Name</u>	<u>Bloomingdale Communi- cations, Inc</u>	<u>Southwest Michigan Communi- cations, Inc.</u>
Principal Business		
Ownership Percentage	100%	100%
Accounting Method	Consolidated	Consolidated
Year ended December 31, 2015		
Original Investment	\$ [REDACTED]	\$ -
Investment advances		
Prior years	[REDACTED]	[REDACTED]
Earnings (losses)		
Prior years	[REDACTED]	[REDACTED]
Current year	[REDACTED]	[REDACTED]
Book value of investment December 31, 2015	[REDACTED]	[REDACTED]
Year ended December 31, 2016		
Earnings (losses)		
Current year	[REDACTED]	[REDACTED]
Book value of investment December 31, 2016	\$ [REDACTED]	\$ [REDACTED]

This report is intended solely for the information and use of the board of directors and management of the Company, the Rural Development Utilities Programs and supplemental lenders, and is not intended to be and should not be used by anyone other than these specified parties. However, this report is a matter of public record and its distribution is not limited.

*BKD, LLP*

West Des Moines, Iowa.  
 April 3, 2017